

MINUTES OF AUGUST 31, 1999
PARAMEDIC TASK FORCE MEETING
Los Angeles Westin Hotel

MEMBERS

PRESENT

Debbie Becker
Bill Bower
Bill Cody
Carol Gunter
Jim Holbrook
Sabina Imrie
Tony Pallitto
Kevin Rittger
Karen Short
Sam Stratton
Kevin White

EMSA STAFF

PRESENT

Richard Watson
Nancy Steiner
Connie Telford
Daryl Walker

ALTERNATES

PRESENT

Dave Magnino
Mike Metro

MEMBERS

ABSENT

Dean Anderson
Bill Koenig
Marshall Morton
Jan Ogar

AUDIENCE

PRESENT

Jeff Eastman
Bruce English

I Review and Approval of July 27, 1999 Meeting Minutes

The minutes were approved with no changes.

II Setting of the Agenda

Replaced by Other Issues the Paramedic Task Force Wants to Take On and Time Frame for Accomplishing Task

Director Richard Watson gave an overview of the NHTSA Technical Assessment Team's recommendations. A copy of the Assessment Report will be sent to Commission Members, Vision Groups, and other constituent groups along with a matrix of the Assessment Team's recommendations and what actions will be necessary to implement the recommendations (e. g., legislation, regulation, funding, current authority or go to a vision group, etc.). A transmittal letter from the Authority with comments addressing the Assessment will accompany the report and matrix.

(NOTE: The NHTSA Assessment, transmittal letter, and matrix are accessible on the EMSA website at www.emsa.ca.gov)

Director Watson reported on the following recommendations from the Assessment Team that he thought would be of interest to the Paramedic Task Force.

Regulation and Policy

- The EMS Authority should pursue consistent statewide standardization and coordination of treatment, transport, communications and evaluation.
- There should be uniform and consistent statewide licensing of all EMS Prehospital Personnel. This should include a process for license suspension, revocation or other disciplinary actions.

Human Resources and Training

- The EMSA should require the use of US Department of Transportation (DOT) National Standard Curricula at all levels.
- The EMSA should develop and introduce uniform and consistent statewide certification/licensure of *all* prehospital personnel.
- The EMSA should standardize EMT-I and EMT-II certification/licensure examination standards.

- The EMSA and LEMSAs should consider adoption of the National Registry as the EMT-I and EMT-II certification examination.

Facilities

- EMSA should develop statewide protocols for triage and transfer of burns (both adult and pediatric) and spinal cord injuries.

Medical Direction

- A statewide minimum scope of practice should be established for all levels of EMS providers.
- A process should exist that allows a LEMSAs medical director to petition EMSA to enhance the scope of practice of EMS providers in their region.

Evaluation

- Develop a statewide integrated information system (as described in the vision document) that will have the capability to monitor, evaluate and elucidate emergency medical services and trauma care in California.
- Enforce the use of a uniform prehospital data set consistent with the NHTSA Uniform Prehospital Data Set. Mandate submission of an agreed upon, timely, limited, uniform common language data set from the LEMSAs to the EMSA.
- Seek ways to improve the number of completed patient care records that are delivered to the ED staff upon patient arrival with a goal of 98% compliance.

He noted that any product that comes out of the Paramedic Task Force will be given to the vision leads to review and then move forward if there are no additional changes. He also suggested that the Task Force look at local EMS Agency accreditation policies.

III Draft Model Disciplinary Guidelines

The Task Force reviewed the changes that were made to the draft Model Disciplinary Guidelines. There was much discussion surrounding items 14 (Field Evaluation) and 15 (Clinical Training Program) regarding liability issues, and the possibility of requiring the individual on probation to carry malpractice insurance. EMSA will look into the feasibility of this requirement. There was also some discussion regarding the development a curriculum for an IEP (Individual Education Plan). Jim Holbrook will discuss the possibility of this with members of the California Paramedic Program Directors.

The Task Force also discussed the possibility of listing all paramedics on the EMSA website or only those that have had action taken against their paramedic license. **The Task Force agreed that only paramedics that have had any action taken against their license (probation, suspension, or revocation) would be listed on the EMSA website at this time.** This item was moved by Carol Gunter, seconded by Sabina Imrie, and approved unanimously.

There was also much discussion regarding the definitions for the terms “gross negligence”, “negligence”, and “incompetence”, and whether to use the terminology from Black’s Law Dictionary, the Medical Board or the Board of Registered Nursing. The Task Force could not come to a consensus on which definitions to use at this time. Daryl will work with the Attorney General’s office and come back with something more definitive.

The Task Force will review the rest of the draft Model Disciplinary Guidelines and the minimum conditions of probation and bring suggested changes to the next meeting.

IV Paramedic Task Force Members’ Statement of Scope of Practice

Carol Gunter will provide recommendations for local optional Scope of Practice for urban and rural areas.

Otherwise, this topic was *deferred to the next meeting* so the Task Force could continue with discussion on the draft Model Disciplinary Guidelines.

V Paramedic Continuing Education Provisions

This topic was *deferred to the next meeting* so the Task Force could continue with discussion on the draft Model Disciplinary Guidelines.

VI Other Issues the Paramedic Task Force Wants to Take On and Time Frame for Accomplishing Tasks

This topic was moved forward to item number II.

VII Adjournment

The meeting was adjourned at 3:00 p. m.